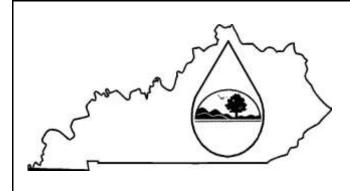
## **KPDES FORM SC**



## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

## **PERMIT APPLICATION**

A complete application consists of this form and Form 1. For additional information, contact: Surface Water Permits Branch, (502) 564-3410.

NAME OF FACIL	ITY:												
I. FACILITY DISCHARGE FREQUENCY					A	GENCY USE			_				
A. <del>Do discharge(s)</del> (Complete Item													
B. <del>How many days</del>	s per week?												
II. A. Give the basi	is of design fo	r sizing of the	wastewater fa	ecility (se	e inst	ructions):							
B. If new discharge	er, indicate an	ticipated disch	<del>arge date:</del>										
C. Indicate the des	i <del>gn capacity o</del>	f the treatment	t system:			MGE	)						
III. Outfall Locati	ion (see instr												
<del>Outfall</del> <del>(list)</del>	D	LATITUDE Minutes	Seconds	D		ONGITUDE  Minutes	Seco		DE	oen m	NG W∆	TED (	
<del>(HSt)</del>	<del>Degrees</del>	<del>iviniutes</del>	<del>seconds</del>	Degre	es	<del>Minutes</del>	5000	<del>mus</del>	<del>KE</del>	<del>CEI V II</del>	NG WA	HER (	натие)
		i											
Method used to ob			nates, etc.)						<u> </u>				

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OUTFALL N	O. OPERATION(S) CONTRI	BUTING FLOW	TREATMEN	<del>IT</del>
<del>(list)</del>	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes fro Table SC 1
600	7. Check the type(s) of wastewater Comestic (60% or more sanitary sewage)		Oil field waste	
	Domestic (60% or more sanitary sewage) Noncontact cooling water	) 	Other (list):	2
No	Domestic (60% or more sanitary sewage)  Noncontact cooling water	except for human consum	Other (list): ption) flow to a treatment plant	.2
No	Pomestic (60% or more sanitary sewage)  Noncontact cooling water  Does all water used at facility (continuous)  Discharge to other than surface to the continuous of the conti	except for human consump e waters. Check appropris	Other (list):  ption) flow to a treatment plant  ate location:	2
No	Domestic (60% or more sanitary sewage)  Noncontact cooling water  Does all water used at facility (contact)  I. Discharge to other than surface	except for human consump e waters. Check appropris	Other (list):  ption) flow to a treatment plant  ate location:	2

III. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).

	Antimony		Copper		Silver	
DEP 7032SC	Arsenic		Lead 2		Thallippovised Ju	<del>y 2011</del>
	Beryllium		Mercury		Zinc	
	Cadmium		Nickel			
	Chromium		Selenium			
		'		ļ!		1

## IX. INTERMITTENT DISCHARGES (Complete this section for intermittent discharges.)

(If bypass points are indicated, information below must be completed

	` • • • • • • • • • • • • • • • • • • •
G NT 1 C1	c 1.1
C Number of hypacs points:	for each hypage )
C. Number of bypass points.	101 Cach by pass.

Check when bypass occurs:	Wet Weather	<del>Dry Weather</del>
Give the number of bypass incidents	<del>per year</del>	<del>per year</del>
Give average duration of bypass	hours	hours
Give average volume per incident	1,000 gallons	1,000 gallons
Give reason why bypass occurs:		

A. Number of Overflow Points: (If discharge is from an overflow point, the information below						
Check when overflow occurs:	Wet Weather	Dry Weather				
Give the number of overflow incidents:	<del>per year</del>	<del>per year</del>				
Give average duration of overflow:	hours	hours				
Give average volume per incident:	<del>1,000 gallons</del>	1,000 gallons				

A. Number of seasonal discharge points Give	
the number of times discharge occurs per year  Give the average volume per discharge	(1,000 - 11 )
occurrence Give the average duration of each	(1,000 gallons) (days)
discharge List month(s) when the discharge	

X. AREA SERVED (see instructions)							
NAME	ACTUAL POPULATION SERVED						
TOTAL POPULATION SERVED							

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XI. COOLING WATER ADDITIVE	ES AN	D THEIR COMPOSITION	<del></del>		
		Compositi	<del>on</del>	(	Concentration (mg/l)
<del>Additive</del>					
XII. EFFLUENT CHARACTERIST	FICS				
A. Indicate results of analysis for p		nts listed below.			
POLLUTANT/PARAMETER	N	IAX DAILY VALUE	AVG DAILY	VALUE	NUMBER OF SAMPLES
<del>BOD</del> ₅					
TOTAL SUSPENDED SOLIDS					
FECAL COLIFORM Or E.COLI					
TOTAL RESIDUAL CHLORINE					
OIL AND GREASE					
CHEMICAL OXYGEN DEMAND					
TOTAL ORGANIC CARBON					
AMMONIA					
DISCHARGE FLOW					
₽ <del>H</del>					
TEMPERATURE (WINTER)					
Г					
TEMPERATURE (SUMMER)					
B. Frequency and duration of flow:					
XIII. CERTIFICATION					
I certify under penalty of law that this with a system designed to assure that q	<del>ualifi</del>	ed personnel properly gathe	er and evaluate the	information (	submitted. Based on my inquiry
of the person or persons who manage submitted is, to the best of my knowle	the sy	stem, or those persons dire	ectly responsible for	or gathering t	he information, the information

submitting false information, including the possibility of fine and imprisonment for knowing violations.

TELEPHONE NUMBER (area code and number):

NAME AND OFFICIAL TITLE (type or print):

Ms.

Mr.

SIGNATURE	DATE

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## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM FORM SC -- INSTRUCTIONS

Listed below are explanations of select Short Form C questions. If further information is needed concerning any question, please contact the Division of Water, Surface Water Permits Branch at (502) 564-3410.

#### I. WHO MUST APPLY

This application is to be completed by services, wholesale and retail trade establishments, and other commercial establishments including subdivisions and schools that propose construction or operation of a wastewater treatment facility or expansion and/or upgrading of an existing treatment plant.

A. Indicate if discharge(s) occur all year. Complete Item IX for any intermittent discharges.

#### II. BASIS OF DESIGN FOR SIZING THE WASTEWATER TREATMENT FACILITY

- A. Give the basis of design for sizing the wastewater treatment facility. Indicate the **actual** number of population served, **actual** number of students for schools, square feet of space, etc. used in determining the size of the wastewater treatment plant.
- B. If application is being submitted by new discharger, indicate date of expected commencement of discharge.
- Indicate the design capacity of the treatment system in million gallons per day (mgd).

#### **III. OUTFALL LOCATION**

For each outfall listed, list the latitude and longitude of its location to the nearest fifteen seconds and list the name of the receiving water. Latitude and Longitude readings should be taken at the last point prior to discharge to receiving water. The method used to obtain latitude and longitude should be listed also (i.e. GPS unit, USGS topographic map coordinates, etc).

#### IV. FLOWS, SOURCES OF POLLUTION AND TREATMENT TECHNOLOGIES

For each outfall provide: (1) a description of all operations contributing wastewater to the effluent, including sanitary wastewater and storm water runoff; (2) the average and design flows contributed by each operation; and (3) the treatment received by the wastewater.

Operations may be described in general terms for storm water. You may use any reasonable measure of duration, volume, or frequency. For each treatment unit, indicate its size, flow rate, and retention time, and describe the ultimate disposal of any solid or liquid wastes not discharged. Treatment units should be listed in order of occurrence and you should select the proper code from Table SC 1 and fill in column 3 b for each treatment unit. Insert 'XX' into column 3 b if no code corresponds to a treatment unit you list.

If you are applying for a permit for a privately-owned treatment works, you must also identify all of your contributors in an attached listing.

- V. Check the type(s) of wastewater being discharged.
- VI. Indicate whether all water used at the facility (except for human consumption) flows to a treatment plant.
- VII. Indicate discharge(s) to other than surface waters.

#### IX. Intermittent Discharges

Indicate the number of bypasses, overflows, and controlled releases that result in point discharges. Items A C (as appropriate) must be completed for each intermittent discharge indicated.

I. For each area served by the wastewater treatment plant, enter the actual population served at the time of application.

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XI. List any cooling water additives (if applicable), their composition, and approximate concentration.

#### XII. EFFLUENT CHARACTERISTICS

This part must be completed by all applicants for all outfalls, including outfalls containing only noncontact cooling water or storm water runoff. However, at your request, the Division of Water may waive the requirements to test for one or more of these pollutants based upon a determination that testing for the pollutant(s) is not appropriate for your effluent(s).

A. List quantitative data for the pollutants or parameters listed. The data may be collected over the past 365 days if they remain representative of current operations. Applicant must collect and analyze samples in accordance with 40 CFR Part 136. Grab samples must be used for pH, temperature, oil and grease, total residual chlorine, Fecal Coliform, and E. coli. For all other pollutants, 24 hour composite samples must be used.

New dischargers should include estimates for the pollutants or parameters listed instead of actual sampling data, along with source of each estimate. All levels must be reported or estimated as concentration and as total mass, except for flow, pH and temperature.

B. Describe the frequency of flow and duration of any intermittent discharge (except for storm water runoff, leaks, or spills).

#### XIII. CERTIFICATION

The certification is to be signed as follows:

Corporation: by a principal officer of at least the level of vice president.

Partnership or sole proprietorship: by a general partner or the proprietor, respectively.

Municipality, state, federal, or other public agency: by either a principal executive officer or ranking elected official

# TABLE SC-1 CODES FOR TREATMENT UNITS

(For use with Form SC, Item IV)

#### PHYSICAL TREATMENT PROCESSES

	111219112 11	REATMENT PROC	
	Ammonia Stripping	1 N	
В	Dialysis		Mixing
	Diatomaceous Earth Filtration		Moving Bed Filters
	Distillation	1 Q	Multimedium
E	Electrodialysis	1 R	Rapid Sand Filtration
F	Evaporation	1 S	Reverse Osmosis (Hyperfiltratio
G	Flocculation	1 T	Screening
H	Flotation	1 U	Sedimentation (Settling)
I	Foam Fractionation	1-V	Slow Sand Filtration
J	Freezing	1-W	Solvent Extraction
K	Gas Phase Separation	1 X	Sorption
L	Grinding (Comminutors)	1 Y	Equalization
M	Grit Removal	1 Z	Intermittent Sand Filters
	CHEMICAL T	REATMENT PROC	CESSES
Α			Disinfection (Other)
B	<u> •</u>		Electrochemical Treatment
			Ion Exchange
C			
Б Б	Dechlorination	2 K 2 I	
	Decinormation Disinfection (Chlorine)		
<del>Г</del> С	Disinfection (Chiornie)Disinfection (Ozone)		
<del>V</del>	Distinection (Ozone)	<u> </u>	Chemical Hydrorysis
٨	BIOLOGICALActivated Sludge	TREATMENT PRO	OCESS Biological Hydrolysis
			Treatment by Plain Aeration
	Nitrification Denitrification		Holding or Detention Pond
	Pre-Aeration		1-Cell Lagoon
	Spray Irrigation/Land Application		2-Cell Lagoon
	Stabilization Ponds		3 Cell Lagoon
H	Trickling Filtration		4 Cell Lagoon
	Rotating Biological ContractorsPolishing Lagoons	3 T	Septic Tanks
J			
۸	Discharge to Surface Water	R PROCESSES	Reuse or Sale of Wastewater
	Ocean Discharge Through Outfall		
	Reuse/Recycle of Treated Effluent		
D		4 H	Grease Removal
	SLUDGE TREATMEN	<del>F AND DISPOSAL I</del>	PROCESSES
Α			
B	Aerobic DigestionAnaerobic Digestion	5 N	Heat Treatment
 C	Belt Filtration	5.0	Incineration
D		5 D	Land Application (Sludge)
<i>E</i>		5.0	Landfill
	Chlorine Treatment		
1	Composting		
G			
	Draing Rode		
H	Drying Beds	<del>3 1</del>	Vacuum Eilteretier
H I	Elutriation	5 U	Vacuum Filtration
H I J	Drying BedsElutriationFlotation ThickeningFreezing (Sludge Treatment)	5 U 5 V	Vacuum Filtration Vibration